



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20543

RQ-2

Donna Knight, Treasurer  
Missouri Democratic State Committee  
419 East High, P.O. Box 719  
Jefferson City, MO 65102

MAR - 5 1997

Identification Number: C00135558

Reference: 12 Day Pre-General Report (10/1/96-10/16/96)

Dear Ms. Knight:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-The beginning cash balance of this report should equal the ending balance of your Amended October Quarterly Report, received 2/18/97. Please clarify this discrepancy and amend any subsequent report(s) that may be affected by this correction.

-Please provide the total(s) for Line 10, Column A of the Summary Page. This amount should equal the amount reported on your loan Schedule C.

-Your calculations for Line 8, Column B appear to be incorrect. FEC calculations disclose this amount(s) to be -\$18,854.73. Please provide the corrected total(s) on the Summary Page. A negative ending balance suggests that you have either overdrawn your account, made a mathematical error, or incurred a debt. If your committee has incurred a debt or obligation, please show a zero balance on Line 8 of the Summary Page and reflect the amount and the nature of the debt on Schedule D and Line 10. 2 U.S.C. §434(b)(8)

-Your calculations for Line 8 appear to be incorrect. Cash-on-hand at the close of the current reporting period should always equal the closing calendar year-to-date cash-on-hand amount. Please provide the corrected total on the Summary Page.

MISSOURI DEMOCRATIC STATE COMMITTEE  
PAGE 2

-You must make an attempt to obtain the full name, mailing address, occupation and name of employer for all individuals who contribute more than \$200 in a calendar year. Please amend your report to include the omitted information.

A committee may demonstrate "best efforts" to obtain the required information by providing the Commission with a description of its procedures for requesting the information and may also supply a copy of a solicitation: the committee must request the contributor information in initial solicitations; make follow-up requests (if necessary); report the information; and file amendments to disclose previously unreported information. Each solicitation must include a clear and conspicuous request for the information. If a committee receives a contribution that exceeds the \$200 threshold but lacks contributor information, the committee must, within 30 days, make an additional written or oral request for the information. Please note that a written request may not include an additional solicitation or material on any other subject, other than thanking the contributor for the donation and must include a pre-addressed return post card or envelope for the contributor's response. An oral request must be documented in writing. Committees must also disclose information that was not provided by the contributor, but is available in any of the committee's records for that current election cycle. Furthermore, if a committee receives contributor information after the contributions have been reported, it must submit with its next report, an amended memo Schedule A listing all the contributions for which additional information was received or file, on or before the next reporting date, amendments to the previous reports on which the contributions were originally disclosed. See 11 CFR §104.3(a)(4)(i) and 11 CFR §104.7.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek

MISSOURI DEMOCRATIC STATE COMMITTEE  
PAGE 3

retribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-Your report discloses receipts totalling \$24,226.07 from the Democratic State Party Victory Fund, which is a joint fundraising committee affiliated with your committee. Please be advised that a ~~memo~~ Schedule A must be provided to itemize your committee's share of the gross contributions received through the joint fundraiser. The memo schedule should itemize each individual who has contributed an aggregate in excess of \$200 during the calendar year, and provide the amount of unitemized contributions received. In addition, the memo schedule should itemize your committee's share of all contributions from political committees, regardless of amount. 11 CFR §102.17(c)(8)(i)(B)

-Schedule H4 discloses a disbursement(s) which is categorized as an exempt expense(s); however, a Schedule H2 has not been filed to disclose the allocation ratio. All committees are required to allocate the direct costs

MISSOURI DEMOCRATIC STATE COMMITTEE  
PAGE 4

of each exempt activity in which the committee disburses funds for both federal and non-federal purposes. The costs are allocated according to the time and space method and reported on Schedule H2. 11 CFR §§106.5(e). Please file a Schedule H2 to disclose the ratio for the exempt activity.

-Please clarify all expenditures for "get-out-the-vote". In addition, if any of the get-out-the-vote activities referenced House or Senate candidates, they should be allocated accordingly, unless merely incidental to the overall activity. If a portion or all of these expenditures were made on behalf of federal candidates, they should be reported on Schedule B or F for Line 23 or 25 of the Detailed Summary Page, as appropriate.

-You have made disbursements for "paid phoning" which you have characterized as exempt activity. In order for a phone bank to be classified as exempt, it must meet the following conditions: The activity is on behalf of the party's Presidential and Vice Presidential nominees; the activity does not involve the use of public political advertising such as television, radio, newspapers, magazines, billboards or direct mail; phone banks are operated by volunteers(although paid professionals may design the system, develop calling instructions and train supervisors); the party committee does not use funds transferred by the national party committee for voter drive activities; the party committee does not use funds designated for a particular federal candidate; and the cost allocable to federal candidates are paid with permissible funds. If the activity disclosed on your report does not meet the definition of "exempt" activity as described above and if any portion of the expenditures were made on behalf of specifically identified candidates, that amount must be disclosed on Schedule B or F supporting Line 23 or 25 of the Detailed Summary Page as appropriate. Please provide the Commission with a more detailed explanation of this activity.

-Schedule A supporting Line 12 discloses a transfer-in from the Democratic National Committee. Schedule H4 supporting Line 21(a) reflects payments for various exempt activities. Payments for this type of activity are exempt from the definition of a contribution or expenditure if certain conditions are met. The conditions are that no public advertising may be used including distribution by direct mail; all funds used for the activity must be permitted under the Act; none of the funds used may have been designated for a particular candidate; and finally, payments for the activity may not be made

**MISSOURI DEMOCRATIC STATE COMMITTEE**  
**PAGE 5**

from transfers-in from the national committee to specifically fund the activity. For further guidance, please refer to 11 CFR §§100.7(b)(15) and (17) and to the Campaign Guide for Party Committees.

Please clarify the nature of the transfers-in and subsequent payments for various exempt activities. If the activity disclosed on your report does not meet the definition of "exempt" activity as described above and if any portion of the expenditures were made on behalf of specifically identified candidates, that amount must be disclosed on Schedule B or F supporting Line 23 or 25 of the Detailed Summary Page as appropriate.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to include a unique identifying title or code for the payment made to several vendors. 11 CFR §104.10. Please amend this report (including all affected schedules) to provide a unique identifying title or code for each PURPOSE/EVENT.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to check the appropriate CATEGORY box for the payment(s) made to several vendors. Please amend your report to disclose the appropriate category.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to include the purpose/event for the joint expenditure to Pitney Bowes. Note that the unique identifying code for an event is not considered an adequate description of purpose. Please amend your report to include this missing information.

-Schedule A supporting Line 12 lists a \$5,000 transfer-in from your non-federal account to "correct deposit error of Teamsters Drive Fund." Please provide the full name of the contributing committee as well as the date the contribution was deposited into your non-federal account.

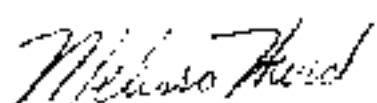
-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule H4 of your report to clarify the following description(s): event expense; walk list. For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

MISSOURI DEMOCRATIC STATE COMMITTEE  
PAGE 6

-Your report disclosed a category of financial activity that has been reflected on the wrong line of the Detailed Summary Page. Contributions from other political committees should be properly disclosed on a separate Schedule A, supporting Line 11(c) of the Detailed Summary Page. Please refer to the instructions contained on the forms to determine the proper categorization when preparing your next filing.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,



Melissa Hurd  
Reports Analyst  
Reports Analysis Division

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 2 OF 8  
FOR LINE NUMBER 11a1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Missouri Democratic State Committee

| A. Full Name, Mailing Address and ZIP Code  | Name of Employer | Date (month, day, year)              | Amount of Each Receipt this Period |
|---|------------------|--------------------------------------|------------------------------------|
| Joseph H. Locascio<br>1444 Merrier<br>K.C. MO 64114   |                  | 3/26/96                              | 8,500.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 2,500.00 |                                    |
| B. Full Name, Mailing Address and ZIP Code  | Name of Employer | Date (month, day, year)              | Amount of Each Receipt this Period |
| Michael Manners<br>682 Valley Brook<br>Blue Springs, MO 64014   |                  | 11                                   | 2,500.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 2,500.00 |                                    |
| C. Full Name, Mailing Address and ZIP Code  | Name of Employer | Date (month, day, year)              | Amount of Each Receipt this Period |
| Kenneth McClain<br>3614 S. Cottage<br>Independence, MO 64055  |                  | 11                                   | 5,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 5,000.00 |                                    |
| D. Full Name, Mailing Address and ZIP Code  | Name of Employer | Date (month, day, year)              | Amount of Each Receipt this Period |
| Cynthia McClain<br>3514 S. Cottage<br>Independence, MO 64055  |                  | 11                                   | 5,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 5,000.00 |                                    |
| E. Full Name, Mailing Address and ZIP Code  | Name of Employer | Date (month, day, year)              | Amount of Each Receipt this Period |
| Mary Jane McQuerry<br>5912 Grand<br>K.C. MO 64113   |                  | 11                                   | 1,875.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 1,875.00 |                                    |
| F. Full Name, Mailing Address and ZIP Code  | Name of Employer | Date (month, day, year)              | Amount of Each Receipt this Period |
| John Menal<br>9 McHale<br>Lake Winnebago MO 64034   |                  | 11                                   | 250.00                             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 250.00   |                                    |
| G. Full Name, Mailing Address and ZIP Code  | Name of Employer | Date (month, day, year)              | Amount of Each Receipt this Period |
| Thomas Strong<br>3947 Engleth St.<br>Mansfield, MO 65809  |                  | 11                                   | 2,000.00                           |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 2,000.00 |                                    |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

19,125.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in FMI)

## Missouri Democratic State Committee

|   |   |  |   |
|---|---|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>A. Danine Land<br>29527 Wood St<br>Wickliffe, OH 44092<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Name of Employer</b><br>MO Democratic Committee<br><b>Occupation</b><br>Comptroller<br><b>Aggregate Year-to-Date</b> = \$ 878.00 | <b>Date (month, day, year)</b><br>10/2/96  | <b>Amount of Each Receipt this Period</b><br>10.00    |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>A. Danine Land<br>29527 Wood St<br>Wickliffe, OH 44092<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Name of Employer</b><br>" "<br><b>Occupation</b><br>" "<br><b>Aggregate Year-to-Date</b> = \$ 878.00                             | <b>Date (month, day, year)</b><br>10/9/96  | <b>Amount of Each Receipt this Period</b><br>310.00   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>A. Danine Land<br>29527 Wood St<br>Wickliffe, OH 44092<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Name of Employer</b><br>" "<br><b>Occupation</b><br>" "<br><b>Aggregate Year-to-Date</b> = \$ 878.00                             | <b>Date (month, day, year)</b><br>10/11/96 | <b>Amount of Each Receipt this Period</b><br>27.00    |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Brenda Lonsberg<br>1236 Glen Eagle Ln.<br>St. Albans, MO 63073<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Name of Employer</b><br>Information Requested<br><b>Occupation</b><br>" "<br><b>Aggregate Year-to-Date</b> = \$ 450.00           | <b>Date (month, day, year)</b><br>10/11/96 | <b>Amount of Each Receipt this Period</b><br>450.00   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Kenneth B. McClain<br>3514 S. Cottage<br>Independence, MO 64055<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Name of Employer</b><br>Self<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> = \$ 15,000.00                    | <b>Date (month, day, year)</b><br>10/15/96 | <b>Amount of Each Receipt this Period</b><br>5,000.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Neil E. Maria McGregor<br>305 Sunnyside School Rd<br>Blue Springs, MO 64014<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br>Information Requested<br><b>Occupation</b><br>" "<br><b>Aggregate Year-to-Date</b> = \$ 250.00           | <b>Date (month, day, year)</b><br>10/1/96  | <b>Amount of Each Receipt this Period</b><br>250.00   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Michael McKinnis<br>20 Overbrook Dr<br>Ladue, MO 63124<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Name of Employer</b><br>Bryan Cave<br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> = \$ 400.00                 | <b>Date (month, day, year)</b><br>10/11/96 | <b>Amount of Each Receipt this Period</b><br>400.00   |

JSTOTAL of Receipts This Page (optional)

6,447.00

JTA2 This Period (last page this line number only)



[illegible]